

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Marco Rubio for President**

**A. Full Name (Last, First, Middle Initial)**

**SHAWN GORMAN**

Mailing Address 117 FORESIDE RD

City

FALMOUTH

State

ME

Zip Code

04105-1758

FEC ID number of contributing  
federal political committee.

C

Name of Employer

L.L.BEAN

Occupation

RETAILER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17.1080124**

Date of Receipt

M M / D D / Y Y Y Y  
02 / 02 / 2016

**CONTRIBUTION**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**SUZANNE GORMAN**

Mailing Address 111 SW 58TH STREET

City

CAPE CORAL

State

FL

Zip Code

33914-7137

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

393.00

**Transaction ID : SA17.1027085**

Date of Receipt

M M / D D / Y Y Y Y  
02 / 21 / 2016

**CONTRIBUTION**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**SUZANNE GORMAN**

Mailing Address 111 SW 58TH STREET

City

CAPE CORAL

State

FL

Zip Code

33914-7137

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

393.00

**Transaction ID : SA17.1041357**

Date of Receipt

M M / D D / Y Y Y Y  
02 / 25 / 2016

**CONTRIBUTION**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

1125.00

**Total This Period (last page this line number only)**.....